

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28116

FILED
Apr 04, 2012
Secretary of State

Entity Name: PUBLIC EDUCATION FOUNDATION OF MARION COUNTY, INC.

Current Principal Place of Business:

1239 NW 4TH STREET
ROOM #001
OCALA, FL 34475

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 670
OCALA, FL 34478

New Mailing Address:

1239 NW 4TH STREET
ROOM #001
OCALA, FL 34475

FEI Number: 59-2949915

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAVAGE, CAROLE
1239 NW 4TH STREET
ROOM #001
OCALA, FL 34475 US

Name and Address of New Registered Agent:

SHEALY, JULIE
1239 NW 4TH STREET
ROOM #001
OCALA, FL 34475 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JULIE SHEALY

04/04/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TREA
Name: BLASER, NICOLAS
Address: 6020 NW 2ND AVENUE
City-St-Zip: OCALA, FL 34475

Title: D
Name: LARSEN, CONNIE
Address: 6978 SE 12TH CIRCLE
City-St-Zip: OCALA, FL 34480

Title: ED
Name: SHEALY, JULIE
Address: 606 SE 40TH TERRACE
City-St-Zip: OCALA, FL 34471

Title: PRES
Name: CERVELLERA, JOHN
Address: 917 SE 16TH STREET
City-St-Zip: OCALA, FL 34471

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JULIE SHEALY

ED

04/04/2012

Electronic Signature of Signing Officer or Director

Date